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PTO/SB/21 (05-03)

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FORM**

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2

Application Number 09/866,003

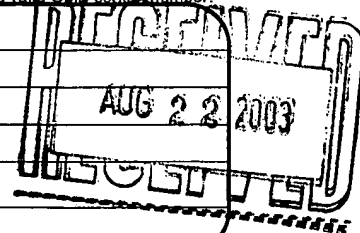
Filing Date May 25, 2001

First Named Inventor Jeff Swanson

Art Unit To be assigned

Examiner Name To be assigned

Attorney Docket Number 31255-1002

**ENCLOSURES (Check all that apply)**

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| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance communication to Group |
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Technology Center 2600

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name Kyocera Wireless Corp.

Signature Lester J. Anderson

Date

08/12/03

CERTIFICATE OF TRANSMISSION/MAILING

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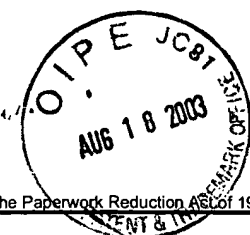
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PTO/SB/81 (06-03)

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**POWER OF ATTORNEY
and
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INDICATION FORM**

Application Number	09/866,003
Filing Date	May 25, 2001
First Named Inventor	Jeff Swanson
Title	..ACCENTUATING GRAPHICAL ELEMENTS ON A MOBILE..
Art Unit	To be assigned
Examiner Name	To be assigned
Attorney Docket Number	31255-1002

I hereby appoint:

☐ Practitioners at Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
Lester J. Anderson	45,833
Mark Snyder	37,239

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number:

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	Kyocera Wireless Corp.				
Address	P. O. Box 928289				
Address					
City	San Diego	State	CA	Zip	92192-8289
Country	USA				
Telephone	858.882.2000	Fax	858.882.3650		

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	David J. Huffaker, Intellectual Property Counsel, Kyocera Wireless Corp.		
Signature	<i>David J. Huffaker</i>		
Date	8-13-03	Telephone	858.882.2000

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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